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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)				Note: A certificate of mailing can only be used for domestic mailings		
26211	7590 04/03/07			of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
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Minneapolis, MN 55440-1022				(Depositor's name)		
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				(Date)		
APPLICATION NO.	FILING DATE	FIRST NAMED I		INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/567,991	02/09/2006	Hidetoshi Nis		Nishikawa	19415-007US1	5510
TITLE OF INVENTION: SEMICONDUCTOR INTEGRATED CIRCUIT DEVICE						
APPLN, TYPE	SMALL ENTITY		E FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$14	400	\$300	\$1700	07/03/2007
EXAMINER		APT	UNIT	CLASS-SUBCLASS	1	
		19	326-093000	_		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). I Change of correspondence address (or Change of Correspondence Address form PTOSB/122) attached. I "Fee Address" indication (or "Fee Address" Indication form PTOSB/123) and PTOSB/124 (and Indication for Tee Address Indication form PTOSB/124).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the names of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
Number Is required.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee identified below, no assignee data unlegared on the petrue. Includion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE (CITY and STATE OR COUNTRY)						
Rohm Co., Ltd. Kyote, JAPAN						
Please check the appropriate assignee category or categories (will not be printed on the patent): [] individual [X] corporation or other private group entity [] government						
4a. The following fec(s) are enclosed: X Issue Fee X Publication Fee (No small entity discount permitted) Advance Order - # of Copies			db. Psyment of Fec(s): A check in the amount of the fec(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fec(s), or credit any overpayment, to Deposi Account Number 16-01502 (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicated above) []a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. []b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered agent or; or the assignee or other party in interest as shown by the records of the United States Patient and Trademark Office.						
(Authorized Signature)				Date) July 3, 2007		
Typed or Printed Name Samuel Borodach				Registration No38,388		
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